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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application of Docket Number

Application or Doctor's Number

100016

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OTHER THAN SMALL ENTITY	
AMENDMENT <i>Ray RE</i>		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
Total (37 CFR 1.16(e))		3	Minus	20	*	x \$ ____ =		x \$ ____ =	
Independent (37 CFR 1.16(b))		1	Minus	3	*	x \$ ____ =		x \$ ____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									
TOTAL ADD'L FEE									

(Column 1)		(Column 2)	(Column 3)		
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE
	3/1/16	Minus	** 20	X \$ ____ =	RATE
Total (37 CFR 1.16(d))	3	Minus	** 20	X \$ ____ =	ADDI- TIONAL FEE
Independent (37 CFR 1.16(b))	1	Minus	** 3	X \$ ____ =	
				+ \$ ____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				TOTAL ADD'L FEE	
					OR
					X \$ ____ =
					OR
					X \$ ____ =
					OR
					+ \$ ____ =
					TOTAL ADD'L FEE
					OR

(Column 1)		(Column 2)	(Column 3)		
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	Minus	**	X \$ ____ =	OR X \$ ____ =
	Independent (37 CFR 1.16(d))	Minus	***	X \$ ____ =	OR X \$ ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					
TOTAL ADD'L FEE					
OR TOTAL ADD'L FEE					

* If the entry in column 1 is less than the entry in column 2, write 20° in column 3.

• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
• If the "Minibar Number Previously Paid For" IN THIS SPACE is less than 20, enter 20:

*** If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The **Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.**

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-B70-9189 and select option 2.